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MONTANA GENERAL EDUCATIONAL DEVELOPMENT (GED) TESTING PROGRAM 16-YEAR-OLD WAIVER APPLICATION FORM

GED Test Center:	City:	ID#: 3000290
APPLICANT SECTION (to be completed)	ted by Applicant)	•
Social Security Number:	Date of Birth:	Sex: Male Female
Phone Number:		
Last Name:	First Name:	Middle Initial:
Mailing Address:	City:	State: Zip:
Last School Attended:	City:	State:
Last Date Attended:	Highest Grade	Completed:
(month/year)		
Applicant Signature		Date:
SCHOOL SECTION (to be completed I	by chief education officer)	
 □ The applicant is no longer enrolled in school. Date of dropped enrollment Attach: 1) school withdrawal document verifying applicant has been out of school 90 days OR 2) letter of approval to pursue GED on school letterhead signed by chief education officer providing applicant's withdrawal date. □ The applicant last attended school in a state other than Montana. The applicant has been advised of local in-school options and has never enrolled in this public school district. Attach verification letter. □ The applicant has graduated from a high school not accredited by the state of Montana. Date of graduation Attach request letter. □ The applicant resides at a Job Corps Center; youth correctional facility; group home; alcohol/drug treatment center; or is under court/youth probation jurisdiction. Applicant's circumstances and withdrawal from tradition school setting warrant pursuit of GED. Attach facility director's request letter. I certify the applicant and his/her parent, legal guardian, or advocate have been advised of available in-school options and that pursuit of a GED is considered in this applicant's best educational interest. School Name: Address: City: State: Zip: 		
-		fficial's Signature
PARENT/LEGAL GUARDIAN/ADVO	CATE* SECTION (must be	e notarized)
I hereby authorize by my signature permission through the GED Testing Program.	for	to pursue a high school equivalency credential
	of parent/legal guardian signatur EENT LEGAL GUARDIA City: C: Subscribed and sworn to	State: Zip: before me this day of, 20
	Signature of Notary Pub My commission expires	blic
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CHECK LIST FOR FILLING OUT THE 16 YEAR-OLD WAIVER FORM

specia may a can be	er of Minimum Age Requirement: An applicant 16-years of age who because of all and warranted circumstances is no longer enrolled in a regular school program apply for a waiver of the minimum age requirement provided the following criteria e documented (16-year old waiver applications must be submitted for review and wal to the State GED Administrator prior to testing):
	1. Completed, signed and notarized 16-year old Age Waiver Application Form with required school documentation attached (2C) demonstrating consensus of applicant; school officials; and applicant's parent/legal guardian that the GED testing program is considered in the best educational interest of the applicant;
	2. Original letter from an Adult Basic Education (ABE) Director or Literacy Program Director certifying that the applicant has enrolled in/attended GED preparation classes and is academically prepared to attempt the GED Test Battery; and/or documentation from same source certifying the applicant obtained pre-test scores substantiating preparedness for the official GED Test Battery;
	3. Letter of documentation, on official letterhead, establishing applicant's need to obtain a GED at age 16, originally signed and coming from one of the following:
	a) post-secondary admissions officerb) employer requiring GED for employment purposes